

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	71058	5-12-98
O.I.P.E. CLASSIFIER		16	5-18-98
FORMALITY REVIEW		68118	5-27-98

INDEX OF CLAIMS

Rejected _____ N _____ Non-elected
 Allowed _____ I _____ Interference
 (Through numeral) Canceled _____ A _____ Appeal
 Restricted _____ O _____ Objected

Claim	Date
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BEST AVAILABLE COPY If more than 150 claims or 10 actions
staple additional sheet here

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